

## **Membership Application**

**FEES** <u>must</u> accompany APPLICATION FORM

Date				
The Secretary, We submit the undermentioned car	ndidate for m	membership of the Club under the rules		
Social Member		Aged Pension Member (	] - To be sigh	hted by staff
Mr / Ms / Mrs / Miss				
Postal Address				
Date of Birth		Email		
Telephone		Occupation		
Email Address: Please tick for	or approva	al to receive promotional and notifi	iication Informa	tion.
I agree to be bound by your rules a	ınd by-laws	and any rules, regulations or by-laws of t	the Club from the	time to
time in force. Copies of constitution	n are availa	ble to member at a nominal fee.		
Applicants Signature				
Social Membership	cial Membership Aged Pension Membership			
One year: \$12.00	<b>D</b> ( )	One year:	\$6.50	( )
Three years: \$31.00	<b>D</b> ( )	Three years:	\$16.00	( )
Five Years: \$51.00	0 ()	Five years:	\$26.00	
• • • • • • • • • • • • • • • • • • • •		years and I recommend them for	•	of the club.
		Membership Number		
		years and I recommend them f		
Prospers Name (Print) Proposers Signature		Membership Number		
Office Use Only:				
Membership Number:		Processed By:		
Date:		Total Amount:		